## COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

IMPROVED SEARCHLIGHT AND CONTROLLER THEREFORE				
the specification of which (check				
y is attached hereto.				
was filed on	as Applicat	ion S/N	·	
and was amended on	(if ap	plicable).		
In hereby state that I have revie above identified specification,	wed and understa including the cl	and the conter aims, as amer		
FI acknowledge the duty to disclose patentability as defined in Titl	•			
1.56.  In hereby claim foreign priority incode, Sec.119 of any foreign appropriate having a filing date which priority is claimed:	benefits under solication(s) for before that of	ritle 35, Unit patent or in the applicat	1011 011	
Prior Foreign Application(s):			Priority Claimed	
N/A (Country) (	Day/Month/Year F	iled)	Yes No	
(Number) (Country) (	Day/Month/Year F	iled)	Yes No	
I hereby claim the benefit under Title 35, United States Code, Sec. 120 of any United States application(s) listed below and, insofar as the of any United States application of this application is not subject matter of each of the claims of this application in the manner provided disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, U.S. Code Sec. 112, I acknowledge the duty to disclose all information material to patentability as the duty to disclose all information material to patentability as defined in Title 37, Code of Federal Regulations, Sec. 1.56(a) which defined in Title 37, Code of Federal Regulations application and became available between the filing date of this application:				
(Application Serial No.)	Filing Date)	( <u>Status</u> : pate (pending, aba	nted, .ndoned)	
(Application Serial No.) (	Filing Date)	(Status: pat (pending, aba	ented, andoned)	

(continued)

Attorne Docket No.: RICE-1

Page 2 of 2

## COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney to prosecute this application and transact all business in the Patent and Trademark Office connected therewith: MENOTTI J. LOMBARDI, Reg. No. 24,009, ITT Fluid Technology, 10 Mountainview Road, Upper Saddle River, NJ 07458; and Robert P. Seitter, Reg. No. 24,856, 4 West Red Oak Lane, White Plains, NY 10604.

Address all telephone calls to Menotti J. Lombardi at (201) 760-5783.

Address all correspondence to <u>Menotti J. Lombardi</u>, ITT Fluid Technology, 10 Mountainview Road, Upper Saddle River, New Jersey 07458.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States imprisonment, or both, under Section 1001 of Title 18 of the United States code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Code and that Such william the soon	
Code and that such willful rather than the application or any patent issued thereon.	
The series of first inventor: DENNIS LEE RICE	9-1-00
Full name of sole of fill finds.  In Inventor's Signature Auris Age (1) formia 907	Date
-Posidence 9106 Mayne Street, Bellflower, California 200	, WO
CitizenshipUSA	
Post Office AddressSame as residence	
Full name of second joint inventor, if any:	
Second Inventor's Signature	Date
Residence	
Citizenship	
Post Office Address <u>Same as residence</u>	
Full name of third joint inventor, if any:	
Third Inventor's Signature	Date
Residence	
Citizenship	
Post Office Address <u>Same as residence</u>	
Full name of fourth joint inventor, if any:	
Fourth Inventor's Signature	Date
Residence	
Citizenship	
Post Office Address <u>Same as residence</u>	